

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number		Filing Date			
							10660317					
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	1											
2		1										
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48												
49												
50												
Total Indep	2											
Total Depend	17											
Total Claims	19											